



Commonwealth of Massachusetts

Division of Fisheries & Wildlife

Wayne F. MacCallum, *Director*

MASSACHUSETTS DIVISION OF FISHERIES AND WILDLIFE

Application to Addle Canada Goose Eggs in Massachusetts

Valid March 1 to June 30

(Please print or type all information)

Name of Applicant _____

Address _____

Town _____ Zip Code _____

Telephone Number _____

Fax Number _____

E-mail _____

3. Names and addresses of persons authorized other than the Owner/Tenant: (if any)

Location of site to Addle eggs _____
(if different from Applicant address)

Do you own or lease the location where the nests are located? ____ Owner ____ Tenant ____ Other
(explain)

Briefly describe situation (nature of problem: residential, agricultural, or commercial?) Include **estimated number of nests** on property and past attempts to solve problem. Add additional sheets if necessary.

Signature of Applicant

Return to H W Heusmann

Date

(Questions? 508-389-6321 or h.heusmann@state.ma.us)

www.mass.gov/masswildlife

Division of Fisheries and Wildlife:

Field Headquarters, One Rabbit Hill Road, Westborough, MA 01581 (508) 389-6300 Fax (508) 389-7890

An Agency of the Department of Fish and Game